PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003

Application or Docket Number

10748660

lots

1_		SMALL ENTITY				OTUED TUAN						
	FOTAL 01 411		(Colum	(Column 1)		(Column 2)		TYPE		OF	OTHER THAN SMALL ENTITY	
	TOTAL CLAIM	2	29				RATE	FEE		RATE	FEE	
	OR .	NUMBE	NUMBER FILED		NUMBER EXTRA		BASIC FE	E 385.0	O OR	BASIC FEE	770.00	
	OTAL CHARGE	29 n	minus 20=		* 9		X\$ 9=		OR	X\$18=	162	
11-	IDEPENDENT (4 minus 3 =		/		X43=		OR	X86=	86
		ENDENT CLAIM						+145=		OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in column 2							,	TOTAL	 	OR	TOTAL	8/0/
	CLAIMS AS AMENDED - PART II										OTHER	
_		(Column 1)	 	(Colum		(Column 3)		SMALL	ENTITY	OR	SMALL	
AMENDMENT A		REMAINING - AFTER AMENDMENT		NUME PREVIO PAID F	BER USLY	PRESENT EXTRA	·	RATE	ADDI- TIONAI FEE	-	RATE [.]	ADDI- TIONAL FÉE
	Total	<u> </u> *	Minus	**		=		X\$ 9=		OR	X\$18=	
AM	Independent	* ENTATION OF M	Minus	***	01.411.4			·X43=	·	OR	X86=	
-	[TINOT PRESI	ENTATION OF M	ULTIPLE DE	PENDENT	CLAIM			+145=		OR	+290=	
		L	TOTAL DDIT. FEE		ایرا	TOTAL						
	(Column 1) (Column 2) (Column 3)								L	_ 10n ,	ADDIT. FEE	
_		CLAIMS		HIGHE	ST	(Column 3)	r		ADDI-	1 1		ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVIOU PAID F	JSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* -	Minus	***		=		X43= ·		OR	X86=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-			OM		
							L	+145=	·	OR	+290=	
							TOTAL DDIT. FEE		OR A	TOTAL DDIT, FEE		
		(Column 1)	·	(Column		(Column 3)	•					
AMENDMENT C	•	CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	R	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	***		=		X\$ 9=		OR.	X\$18=	
ME	Independent	*	Minús	***		=		X43=				
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR _	X86=	
		فنا	145=		OR.	+290=						
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR AC	TOTAL DIT. FEE	
1	ਾਜe ⁻Highest Nur he "Highest Numl	nber Previously Pa ber Previously Paid	id For" IN THIS For" (Total or	S SPACE is le Independent)	ess than is the h	3, enter "3." lighest number f		or. FEE in the appro	opriate box			